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Chair

The Honourable Denis Paradis

Standing Committee on Official Languages

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● (1610)

[*Translation*]

The Chair (Hon. Denis Paradis (Brome—Missisquoi, Lib.)): Pursuant to Standing Order 108(3), we are continuing our study on issues relating to French-language training in the field of nursing in Canada.

We apologize for the delay with the witnesses. We had to vote in the House, and I have the feeling that there will be another vote soon. Unless I'm mistaken, there is half an hour of speeches in the House, from 4:00 p.m. to 4:30 p.m. The bells will ring, and then the vote will take place around 5:00 p.m. So we'll have to end the meeting around 4:45 p.m.

Between now and then, we'll let you make your presentations of about 10 minutes, then the committee members will ask you questions or make comments.

We will start right away.

Go ahead.

Dr. Cynthia Baker (Executive Director, Canadian Association of Schools of Nursing): We'll try to go as quickly as possible.

The Chair: Not to quickly, because the interpreters have to be able to follow you.

Dr. Cynthia Baker: Very well.

The Canadian Association of Schools of Nursing, or CASN, is seeking the support of stakeholder here today in order to find the best possible solution to maintain access to health care in French in francophone communities outside Quebec.

I will begin with a brief summary of the situation and steps taken to date to find solutions.

With your permission, I will continue in English so that members of the College of Nurses of Ontario can follow my comments.

[*English*]

There's evidence of low pass rates among francophone nursing students on the American entry-to-practice exam, and this is putting access to health care in French at risk in francophone communities outside of Quebec. It's also putting francophone nursing education at risk outside of Quebec. Many francophones who wish to become nurses are choosing to enrol in English programs because of concerns related to the exam. The issue has revolved around translation and a lack of preparatory resources. At my association, we have received many complaints about the translation. I understand that there have been some improvement, but this has been an issue.

The translation company is Geo Group Corporation translation services in Madison, Wisconsin. It does translations globally in multiple languages, primarily for commercial businesses. Their method is translation rather than adaptation. We've learned from federal translators and from psychometricians in Canada that adaptation is a rigorous, more specialized process, and it's recommended required for high-stakes exams in both languages, to ensure equity.

Unfortunately, although there have been improvements, I believe, to the existing translation, I understand that it's not really sufficient to ensure an equivalent exam. I think an important point to realize is that the translation is not a once and for all thing that happens. The exam questions are being continuously developed, continuously updated, and the exam test plan is being continuously updated. It's really not just a question of improving the existing translation, then, but of ensuring that there's a methodology going forward that ensures an adequate, equitable translation.

An adaptation is more expensive, I understand, than a basic translation, but it is what is used in Canada.

I want to mention also that another issue with this linguistic aspect, the translation, is that Canadians now form 20% of the panels developing test questions. The Americans are 80%, and there are 20% Canadians. The group excludes, however, any francophone with limited English abilities, because the work is done in English. This excludes francophone nurses from participating.

Returning to the second question, the lack of preparatory resources, there are multiple commercial resources available in English. The NCSBN, which is the organization that owns and sells the exam, offers commercial online prep courses and prep modules. Many of these resources are computer-based, they're sophisticated, and they are used extensively in schools in the United States and are now used extensively in anglophone schools across Canada.

● (1615)

We've just done an analysis of schools that have undergone accreditation in the last two years to see what use has been made of these preparatory resources, and it's large. They are used to evaluate students throughout the program. They are also used to replace some kinds of courses, so they're integrated into the curriculum.

With respect to solutions to date, we wrote to NCSBN requesting that the exam have the questions in both English and French, so that if a francophone student has difficulty understanding the French, they can refer to the English, and that would tip them off. That's often done in high-stakes exams in Canada.

We didn't get a response, but I have learned—and I believe this is correct, although I can't verify it—that their computer software doesn't allow for that function of toggling between languages. However, the high-stakes exam software that we use in this country does allow for that type of toggling between French and English.

The other thing we requested is that they make available preparatory resources in French. They wrote to us last June, I think, and said they were putting together a preparatory exam in French, and I understand they've been working on it. I don't know that it's out yet, but they have been working on that exam.

We do have a concern going forward. I think this will be helpful, but it will not be at the same level of sophistication as these commercial resources that are being used. Our concern in the future is that the exam does get revised. We have information that they're testing a new type of question, to test clinical judgment and this sort of thing. We predict that this will result in a lot more preparatory resources to help people understand those kinds of questions or answer these questions well, but will they be available in French? As we go forward, will there be commercial products available in French?

● (1620)

[*Translation*]

The Chair: Dr. Baker, we are already at seven minutes.

[*English*]

Dr. Cynthia Baker: Okay. I'm so sorry. I've taken too long.

[*Translation*]

The Chair: Would anyone else like to take a minute to speak?

Dr. Cynthia Baker: In that case, I'm finished.

I'll turn things over to my colleagues now.

Ms. Ashley Pelletier-Simard (Director of Bilingualism and Translation, Canadian Nursing Students' Association): My name is Ashley Pelletier-Simard, and I am the director of Bilingualism and Translation with the Canadian Nursing Students' Association.

I'm currently a student at Dalhousie University in Halifax, and I am starting my last year in the advanced standing nursing program.

I graduated from a francophone secondary school, and I am very fortunate to be a Canadian citizen who speaks both languages fluently. However, I chose to continue my studies in English. Not all students have the opportunity to study in English. Yet it's our right as Canadians to have access to services in the language of our choice.

I asked my francophone committee members about their experience to date. They told me they were disappointed that in 2018 there were still language problems in a country that claims to be proud to be bilingual.

As far as the NCLEX exam is concerned, you will easily understand how difficult and frustrating it can be to learn a subject in French, relearn it in English and end up taking an exam in French. This examination is translated by Americans without taking into account the turns of phrase, a crucial element in such an important examination.

Many students in northern New Brunswick do not have the opportunity to adequately prepare for the exam, as they don't understand English and all preparatory materials are in English. They are disappointed that they don't have access to the same services in their native language.

The University of Regina's La Cité campus and the University of Alberta will launch a bilingual nursing program in 2018. These will be classes of fewer than 15 students.

Why are so few students enrolling in a program that would improve the quality of their nursing services? The answer is simple: all students want the opportunity to pass, but the French version of the NCLEX exam and the French preparatory material leave much to be desired.

A change must be made in the administration of this exam before other students decide, like me, not to pursue their studies in their native language or choose another career because the risk of failing is too high.

Thank you.

The Chair: Thank you, Ms. Pelletier-Simard.

Ms. Larocque, you have the floor.

Ms. Sylvie Larocque (Director, School of Nursing, Laurentian University, As an Individual): Good afternoon. My name is Sylvie Larocque. I'm the director of the School of Nursing at Laurentian University.

Aside from the NCLEX-RN exam, things haven't changed. In the past, 80% to 100% of francophone students at Laurentian University chose to take the national exam in French. Since the NCLEX-RN came along, the opposite is true: 80% to 100% of our students take the exam in English. They say they have no choice. They find it unfair to have to take their program in French for four years, and then feel obliged to study and write the exam in English.

The reason they give is that they don't have access to resources in French. They also hear their colleagues trying to take the exam in French say that the translation isn't well done and that they don't understand the questions. Moreover, they realize that the success rate of those who take the exam in French isn't the best. Their colleagues don't pass when they take the exam in French, but they pass after taking the exam in English. Students know all the statistics, and they choose to take the exam in English.

When I surveyed the students, they told me that they would take the exam in French if they had a choice. They studied in French, in their mother tongue, and they know all the terminology they used for four years in French. In the survey, I also asked students if, now that they knew or felt they had to take the exam in English, they would still have decided to study in French. To this question, 28% said no, and 28% were unsure. This means that more than half of the students questioned the fact that they had studied in French.

New students are now increasingly reluctant to enrol in the program in French. The rate of participation in this program will therefore decrease, which is contrary to the efforts of Health Canada's Official Language Community Development Bureau, in collaboration with the CNFS, to attract more students to our francophone programs and to increase access to nursing services in French.

● (1625)

The Chair: Thank you, Ms. Larocque.

I would ask the next witnesses to be a little more concise, so that my colleagues can have time to speak.

I invite the next witness to go ahead.

Ms. Michelle Lalonde (Professor, School of Nursing of the Faculty of Health Sciences, University of Ottawa, As an Individual): My name is Michelle Lalonde, and I'm from the University of Ottawa.

Our university offers several nursing programs, including an entry to the profession program in French or English. The two programs are exactly the same, the content is identical, the admission criteria are completely the same. However, on the anglophone side, the pass rate for the NCLEX-RN exam is 86%, compared to 57% on the francophone side.

Another of our concerns is the marked decrease in the number of francophones taking the exam in French. In 2017, last year, only seven of our students chose to write the exam in French. Although the mother tongue of the majority of our students is French, and they prefer to write the exam in that language, they instead choose to do it in English because of the lack of preparatory resources in French, they feel the translation of the exam is poor and they are afraid of failing the exam in French.

Thank you.

The Chair: Thank you very much.

Let's move on to the next witness.

Mrs. Liette-Andrée Landry (Professor, Faculty of Nursing, Shippagan campus, Université de Moncton, As an Individual): Good afternoon. I am Liette Andrée Landry, and I'm from northeastern New Brunswick.

I want to point out that few of my students are comfortable in English, and that they are mostly Francophones. Rather than repeat what others have said, I will bring the following to your attention. After our program was restructured, over 95% of our students who wrote the Canadian exam in 2014 passed, which was above the national average at the time. After the arrival of the American exam, however, this rate dropped to about 20%. Depending on where you are in New Brunswick, the success rate remains between 20% and 30% for students who take the exam for the first time.

I want to make it clear that the program we offer today is exactly the same as in 2014, and that the type of student taking this exam has remained unchanged. The only element that has changed since 2014 is the entry-to-practice exam.

Obviously, we would like to find a solution that would not only suit our students and nurses in New Brunswick, but that could also apply to other francophones elsewhere in Canada.

Thank you.

The Chair: Thank you, Mrs. Landry.

Mr. Godbout, the floor is yours.

Mr. Pierre Godbout (Director, School of Nursing, Université de Moncton, As an Individual): As you know, the New Brunswick Commissioner of Official Languages has just ruled that the Nurses Association of New Brunswick has violated the provincial Official Languages Act.

I will quote from the report:

> ... There is indeed a significant gap in the exam preparation resources available to one linguistic community compared to the other. Whereas there is only one French-language question bank tool, with no simulation exam and a limited number of practice questions, there is a vast array of high quality English-language exam simulations that are commercially available. Therefore, Francophone candidates are not on a level playing field compared to their Anglophone counterparts....

This clearly demonstrates the situation.

We have started to work with the members of the association. There wasn't much reaction to the commissioner's report. However, we have established a partnership in which we are exploring the possibility of substituting another review. Last year, when the executive director of the association appeared before you, she said that the association was ready to look at other resources. Indeed, our provincial association has the authority to adopt another review, and we are currently working on a solution that we believe we can launch in September 2019.

The Chair: Thank you very much, Mr. Godbout.

We're going to slightly revise the amount of time for each colleague to ask questions. We'll go around the table with three minutes each.

We'll begin with Mr. Clarke.

Mr. Alupa Clarke (Beauport—Limoilou, CPC): Thank you, Mr. Chair.

Good afternoon, ladies and gentlemen.

Thank you to the witnesses for being with us today.

I'm sorry, the exchanges will be brief, but don't worry; you can send us an email with all the documentation, and we will read what you have to say.

This situation has been discussed in recent articles, and we have been quite surprised. I would like to understand what the situation is.

Ms. Larocque, you mentioned a national exam. Is the NCLEX exam used across Canada or only in New Brunswick?

Ms. Sylvie Larocque: It's used in every province except Quebec, where this exam isn't used.

Mr. Alupa Clarke: Okay.

Mr. Godbout, you said that the Nurses Association of New Brunswick could unilaterally change the situation right now.

Mr. Pierre Godbout: The circumstances of entry-to-practice, including the nursing practice entrance examination, are under provincial jurisdiction only. All provinces must establish these criteria.

● (1630)

Mr. Alupa Clarke: Could a federal professional body impose this decision on the provincial association?

Mr. Pierre Godbout: No. The provincial association must make this decision of its own accord.

Mr. Alupa Clarke: Does Brian Gallant, the Premier, have any power in this?

Mr. Pierre Godbout: The New Brunswick Nurses Act gives the association authority in all matters relating to the regulation of the profession and all conditions to protect the public.

The Premier does not have that power. To get it, he would have to change the Nurses Act. That's what I've been told.

Mr. Alupa Clarke: I think the Premier had a fairly timid response yesterday.

Now, the Société de l'Acadie du Nouveau-Brunswick, the SANB, wants to sue the Nurses Association of New Brunswick. What is your reaction to this?

Mr. Pierre Godbout: This action was taken by students who tried the exam several times, including one student who tried it nine times. I have statistics. These are mostly people from Mrs. Landry's area. Several students attempted the exam up to seven times without passing. Students from her part of the country came together to say that was enough.

The fee for writing each examination must be taken into consideration. The registration fee is approximately $500 each time, not including travel expenses. There are other costs, although they are difficult to assess, namely, the mental effect of such a situation. Imagine how it feels to fail the exam seven times after successfully completing a difficult four-year undergraduate program.

Mr. Alupa Clarke: It's certainly terrible.

Ms. Pelletier-Simard, are there other provinces in Canada where students are having the same problem? For example, is this the case for francophones in Manitoba?

Ms. Ashley Pelletier-Simard: All students of universities who offer the program in French face the same problems.

Mr. Alupa Clarke: This has a direct impact on access to health care, as nursing students aren't becoming nurses. This is very serious.

Mr. Généreux, you may continue.

Mr. Bernard Généreux (Montmagny—L'Islet—Kamouraska—Rivière-du-Loup, CPC): Ms. Pelletier-Simard, with a name like yours, I'd swear you're from my riding.

It is extremely unfortunate to find ourselves in such a situation. Your testimony is important today, because you are the future of the profession. You're telling us that, despite all your efforts as students, you aren't able to pass the entry-to-practice exam. In fact, as Mrs. Landry said, the failure rate is disproportionate compared to that of anglophones.

How did we end up in this situation when, in 2014, the success rates for anglophones and francophones were the same?

The Chair: I'm sorry to interrupt you, but the bells are summoning us for a vote in the House.

I ask for unanimous consent to continue the meeting for 15 minutes or so.

Mr. Bernard Généreux: Is the vote in half an hour, Mr. Chair?

The Chair: The vote is in half an hour. We could continue for 15 or 20 minutes.

Does everyone agree?

Some hon. members: Agreed.

Mr. Bernard Généreux: Mrs. Landry and Ms. Pelletier-Simard, you could answer my question.

How did we get into this situation?

Mrs. Liette-Andrée Landry: I can answer based on my experience.

The exam changed in 2015. It was a completely new exam.

Mr. Bernard Généreux: Across Canada?

Mrs. Liette-Andrée Landry: Yes, across Canada. The exam comes from the U.S.

Educational institutions had no decision-making power. The decision was made at a higher level.

Mr. Bernard Généreux: Ms. Baker, who decided that this exam would be administered across the country?

Mr. René Arseneault (Madawaska—Restigouche, Lib.): The provincial associations did.

Dr. Cynthia Baker: The decision was made by every regulatory body in Canada, except Quebec. They jointly decided to adopt the American exam. That said, the decision does in fact fall under provincial jurisdiction, even though it was made by all the organizations.

Mr. Bernard Généreux: You are saying that they came together and decided to change the exam.

Dr. Cynthia Baker: Yes.

Mr. Bernard Généreux: They must have some reasons for deciding to adopt a new exam. Do you know what the reasons are?

Dr. Cynthia Baker: No.

They used to talk about having a computer adaptive exam, among other things. However, you have to remember that the National Council of State Boards of Nursing (NCSBN), which sells the U.S. entrance exam, has decided to globalize it. It wants to sell the exam around the world, in countries where there is a fairly advanced health care system, such as Canada.

The Chair: Thank you, Ms. Baker.

I will now give the floor to Mr. Arseneault.

Mr. René Arseneault: Ms. Baker, since I have very little time, I'm going to ask you, if it's possible, to answer my questions with yes or no. I want to make sure that I have understood the content of the documentation that we have. We have received you here before. I think it was in May of last year.

For Canadian nursing associations in the various provinces, the exam had the advantage of being in electronic format and faster. In addition, there is significantly less red tape to obtain the results.

Is that correct?

● (1635)

Dr. Cynthia Baker: Yes. That's what they said, and I think now they are saying that—

Mr. René Arseneault: Thank you. I have some other questions.

Am I correct in saying that this exam was chosen purely and simply to save time and money, to make the administration of exams much easier and faster?

Dr. Cynthia Baker: I think the associations believe very strongly that the exam is effective in determining who is ready to practice and who is not. In any event, it would be better to ask the representatives from the associations.

Mr. René Arseneault: However, my understanding is that the university faculties of nursing were never consulted. That makes no sense.

Dr. Cynthia Baker: No, they did not consult the professors from nursing faculties.

Mr. René Arseneault: I would now like to talk about New Brunswick.

I come from northern New Brunswick, a homogeneous region that is almost exclusively francophone. Some people there do not speak English or, like me, have trouble speaking it.

What is the current position of the Nurses Association of New Brunswick?

Mr. Pierre Godbout: In the beginning, in 2012, we came to the same conclusions as the ones in the commissioner's report and we expressed our concerns to the folks from the association. At that time, they said that time was needed, that the NCSBN would provide francophone resources, and that there was nothing to worry about.

Mr. René Arseneault: However, they did not.

Mr. Pierre Godbout: No, not at all.

Mr. René Arseneault: I know.

We read Michel Doucet's letter in *Acadie Nouvelle*. He is a constitutional expert.

Since you are closer than I am to what is happening on the ground, could you tell me what the current position of the Nurses Association of New Brunswick is?

Mrs. Liette-Andrée Landry: The NANB has not taken a position since the commissioner's report was released about two weeks ago. It hasn't contacted us yet. So we can't answer that question.

Mr. Pierre Godbout: As I mentioned earlier, the executive director of the NANB publicly said before this committee that she would consider another option. Since then, a national advisory committee has been created and she is a member, along with other anglophones and francophones. We are currently working on a project to create a so-called final exam. This will consolidate the basics of the old examination. The process is led by a committee made up of partners, including Yardstick Assessment Strategies, commonly known as YAS, which purchased the fundamentals of the former Canadian exam. They are modernizing it. Writing sessions were held to incorporate new elements. Work will continue over the summer. We hope to proceed with the validation for anglophones and francophones in the fall of 2018 or January 2019. If all goes well with the psychometric tests, the product will be launched in the fall of 2019.

What we are asking the association—

Mr. René Arseneault: How much time do I have left, Mr. Chair?

The Chair: I will give the last minute and a half to Mr. Lefebvre.

Mr. Pierre Godbout: Let me quickly finish my answer.

We want the association to have the authority to determine that this final exam will become for us, in New Brunswick, especially for francophones, the entry-to-practice exam. We will then live with its decisions.

Mr. Paul Lefebvre (Sudbury, Lib.): Along the same lines, I would like to talk about Ontario. You talked about what's happening in New Brunswick, but I'd like to know what the situation is in Ontario.

Ms. Sylvie Larocque: The regulators know that the exams exist, but it's up to them to decide on the choice of exam.

Mr. Paul Lefebvre: Clearly, we are less advanced than New Brunswick.

You were here when the representative from the College of Nurses of Ontario appeared before us last year. You heard him when he told us that the low success rate was normal, but that the College was still dealing with it by taking the following measures in particular:

> This year we will be meeting with educators in our French education programs to discuss this issue and to gain greater insight. In addition, we will be conducting research with exam candidates who graduate from a French program to gain a better understanding of their experience with the exam and what influences their choice of exam language.

Is that study still in progress?

● (1640)

Ms. Michelle Lalonde: It is completed and available on the organization's website. They spoke with seven or eight professors from francophone programs in Ontario, as well as with a number of francophone students. The report says the same thing as us, namely that the students chose to take the exam in English. Sure, the sample size wasn't huge, but still.

Mr. Paul Lefebvre: What solution are they advocating?

Ms. Michelle Lalonde: They are not.

The Chair: Thank you, Mr. Lefebvre.

It is now your turn, Mr. Choquette.

Mr. François Choquette (Drummond, NDP): Thank you, Mr. Chair.

Before me I have the Action Plan for Official Languages—2018-2023: Investing in Our Future, which includes an investment of $174.3 million in training for health professionals. That is a lot of money and that is good, but it is still not enough to make up for the delay linked to indexation. We added $22.5 million. By that, I mean that a lot of money is invested in access to health care, but because of a problem like that, we shoot ourselves in the foot and, unfortunately, we back off.

As federal MPs, we absolutely must do something to support you. I'm not sure what yet, but we absolutely must intervene, because that is unacceptable. The area of health is extremely important and is one of the pillars of our society.

I know that the anglophones are satisfied with their exam; that's not a problem. However, it is a problem for the francophone minority, and it is the federal government's responsibility to look after official language minority communities.

I understand that an exam is being developed and that there will be tests soon. Can the federal government provide you with financial assistance? Can it support you by providing human resources? We need to do something to show the colleges and associations that we are serious. The government must support the communities and tell them that a very good Canadian exam will be developed. Then, the colleges and associations will be able to choose the exam they wish to administer in French.

Dr. Cynthia Baker: Our association, in collaboration with Yardstick and other psychometric companies, is developing this final exam. We are using the resources we have, but we could certainly use some help.

Mr. François Choquette: You are using your in-house resources.

There's a crisis, and we need to know what your needs are and to find a solution. If that is what it takes to wake up the associations and colleges, then let us support the development of an appropriate and valid French exam adapted to the Canadian reality, not translated. Earlier, you said that an exam must be designed directly in French. That is the direction in which we must go.

Send us letters and recommendations so that we can do something. That is the priority.

There is not much time left, but I will let you add something.

Mrs. Sylvie Boucher (Beauport—Côte-de-Beaupré—Île d'Orléans—Charlevoix, CPC): I just have one question.

Are you in contact with people from the Société Santé en français, at the federal level?

Voices: Yes, they are here.

Mrs. Sylvie Boucher: They are here? That's perfect, that's what I wanted to know.

Thank you.

The Chair: Thank you.

Mr. Choquette, were you finished?

Mr. François Choquette: Yes.

The Chair: I would point out to the witnesses that, if they want to conclude their testimony, they can send an email to the clerk of the committee. Please do not hesitate to do so.

I will now turn to the members of the committee.

We had planned to have people from the College of Nurses of Ontario and the Nurses Association of New Brunswick, but we have to postpone that. We will try to invite them next week. The clerk will try to contact them for that purpose.

Mr. Darrell Samson (Sackville—Preston—Chezzetcook, Lib.): I just have one question for the witnesses, Mr. Chair.

The Chair: Go ahead, Mr. Samson.

Mr. Darrell Samson: Has a complaint been filed with the federal Commissioner of Official Languages?

Mr. Pierre Godbout: Yes.

Mr. Darrell Samson: Did he agree to address the complaint?

Dr. Cynthia Baker: He said that he couldn't deal with health and education issues. Our problem is in both of those areas.

Mr. René Arseneault: The problem—and this is particularly the case in New Brunswick, an officially bilingual province, like Canada—is that each province delegates authority to an association of nurses. It is a matter of provincial jurisdiction. New Brunswick has a remedy. I don't know whether it's being used, but I know what the first item on the agenda of the next annual general meeting would be if I were a member of your association.

The problem, in Ontario and Manitoba, is that francophones are in the minority and there are no laws that protect bilingualism. Perhaps there are, but the fact remains that we have to work on the laws. Contrary to what Mr. Choquette says and hopes, but with whom I nevertheless agree, we cannot impose a pan-Canadian exam on associations that fall under the jurisdiction of each province individually. The authority is delegated to the provinces of the associations.

● (1645)

The Chair: Thank you very much, colleagues.

My thanks also go to the witnesses.

Once again, I'm sorry that we were pressed for time.

The committee will meet again next Monday. The meeting is adjourned.

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